

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	cm S		\$12/100
O.I.P.E. CLASSIFIER	M M	50	05-06-700
FORMALITY REVIEW		19833	6/30/00
RESPONSE FORMALITY REVIEW			

Best Available Copy

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 -+ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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